Fill in this infor	mation to identify your	case:			
Debtor 1	Tamika Michelle	Jones			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN		
Case number	17-44665-TJT				
(if known)	17 44000 101				Check if this is
				_	amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 30,000.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 9,360.00 1c. Copy line 63, Total of all property on Schedule A/B..... 39.360.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 22,301.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6i of Schedule E/F..... 61,541.00 Your total liabilities Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 1,807.83 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 1.286.48 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 Ú.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

Case number (if known) 17-44665-TJT

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,836.99

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	61,064.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	61,064.00

								4/13/17 4:34
Fill i	n this information	to identify	your case and th	is filing	j:			
Debt			nelle Jones					
Debt		t Name	Middle	Name	Last Name			
		t Name	Middle	Name	Last Name			
Unite	ed States Bankrupt	cy Court for	the: EASTERN	DISTRI	CT OF MICHIGAN			
Case	e number <u>17-44</u>	665-TJT					I	☐ Check if this is ar amended filing
_	icial Form hedule A	_	_					12/15
nforn	nation. If more space er every question.	e is needed,	attach a separate sh	neet to tl	married people are filing together, both are entition on the top of any additional pages, Estate You Own or Have an Interest In			
	Yes. Where is the pr	-1						
1.1	18997 Kenosha	S+		_	is the property? Check all that apply			
-	Street address, if availab		cription		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of	any secured	ns or exemptions. Put claims on Schedule D: s Secured by Property.
	Harper Woods	МІ	48225-0000		Manufactured or mobile home	Current value		Current value of the portion you own?
-	City	State	ZIP Code		Investment property		,000.00	\$30,000.00
					Timeshare Other	(such as fee	simple, tenai	ur ownership interest
				Who	has an interest in the property? Check one Debtor 1 only	a life estate), Fee Simpl	e Sole Ow	ner
	Wayne				Debtor 2 only			
-	County					- Check if	this is comn	nunity property
					At least one of the debtors and another	(see instru	ictions)	idinity property
					r information you wish to add about this item erty identification number:	, such as loca	I	
					your entries from Part 1, including any e			\$30,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Official Form 106A/B Schedule A/B: Property

page 2

Debtor 1	Tamika Michelle Jones		C.	ase number (if known)	17-44665-TJT
☐ Yes.	Describe				
□ No	es ples: Everyday clothes, furs, leat Describe	her coats, designer	wear, shoes, accessories		
	Miscellane	ous Clothing			\$500.00
□ No	ples: Everyday jewelry, costume Describe		nt rings, wedding rings, heirloom jew	elry, watches, gems, g	old, silver \$100.00
	Miscellane	ous Costume Je	weiry		\$100.00
Exam _i ■ No □ Yes. 14. Any of ■ No	arm animals ples: Dogs, cats, birds, horses Describe ther personal and household it Give specific information	ems you did not a	ready list, including any health aid	ds you did not list	
	the dollar value of all of your e art 3. Write that number here		including any entries for pages yo	ou have attached	\$4,100.00
Part 4: De	escribe Your Financial Assets				
Do you ov	wn or have any legal or equitab	ole interest in any o	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	ples: Money you have in your wa	•	n a safe deposit box, and on hand wl	hen you file your petition	on
17. Depos <i>Exam</i> ☐ No	sits of money ples: Checking, savings, or other institutions. If you have mu	financial accounts;	certificates of deposit; shares in creather same institution, list each.	dit unions, brokerage h	nouses, and other similar
Yes.			Institution name:		
	17.1. Che	cking Account	Christian Financial C.U.		\$250.00
	17.2. Sh a	re Account	Christian Financial C.U.		\$10.00
Exam _i ■ No		counts with brokerag	ge firms, money market accounts		
☐ Yes.	Institu	tion or issuer name			
	ublicly traded stock and intere venture	sts in incorporated	d and unincorporated businesses,	including an interes	t in an LLC, partnership, and
	Give specific information about				
Official For	m 106A/B	Sch	nedule A/B: Property		page 3

De	btor 1	Tamika Mich	elle Jones			Case number (if k	nown)	17-446	65-TJT	
			Name of entity:			% of ownership:				
	Negotia Non-ne ■ No	able instruments egotiable instrum	prate bonds and other ne include personal checks, ents are those you cannot	cashiers'	checks, promissory no	otes, and money orders.				
	□ res.	Give specific into	rmation about them Issuer name:							
	Examp ■ No	nent or pension bles: Interests in I	RA, ERISA, Keogh, 401(k	k), 403(b),	thrift savings account	s, or other pension or profit-sh	naring	plans		
	□ 1es.	LIST CACIT ACCOUNT	Type of account:		Institution name:					
	Your sl		d deposits you have made			ice or use from a company water), telecommunications c	ompar	nies, or ot	hers	
	☐ Yes.				Institution name or in	dividual:				
23.	Annuiti ■ No	ies (A contract fo	r a periodic payment of mo	noney to yo	ou, either for life or for	a number of years)				
	☐ Yes	Iss	suer name and description	n.						
			on IRA, in an account in a 529A(b), and 529(b)(1).	a qualifie	d ABLE program, or	under a qualified state tuition	on pro	ogram.		
	☐ Yes	Ins	stitution name and descrip	ption. Sepa	arately file the records	of any interests.11 U.S.C. § 5	521(c):			
	■ No	•		y (other th	han anything listed in	n line 1), and rights or powe	rs exe	ercisable	for your	benefit
	☐ Yes.	Give specific info	ormation about them							
			ademarks, trade secrets, ain names, websites, prod	•		•				
	☐ Yes.	Give specific info	ormation about them							
27.	License Examp ■ No	es, franchises, a bles: Building perr	and other general intang mits, exclusive licenses, co	gibles cooperative	e association holdings	s, liquor licenses, professional	licens	es		
	☐ Yes.	Give specific info	ormation about them							
М	oney or I	property owed to	o you?					por Do	rent valuation you on the deduction of deductions or exe	own? t secured
	Tax ref ■ No	unds owed to yo	ou							
	☐ Yes.	Give specific info	rmation about them, include	uding whet	her you already filed t	he returns and the tax years				
29.		support bles: Past due or l	lump sum alimony, spousa	al support	i, child support, mainte	enance, divorce settlement, pr	operty	settleme	nt	
	_	Give specific info	rmation							
30.	Examp _					pay, vacation pay, workers' c	compe	nsation, S	Social Sec	urity
	■ No □ Yes.	Give specific info	ormation							

Official Form 106A/B

page 4

Schedule A/B: Property

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Debtor 1 **Tamika Michelle Jones** Case number (if known) 17-44665-TJT

	Tulling Michelle College			11 4	+000 101
Par	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$30,000.00
56.	Part 2: Total vehicles, line 5		\$5,000.00	_	
57.	Part 3: Total personal and household items, line 15		\$4,100.00		
58.	Part 4: Total financial assets, line 36		\$260.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$9,360.00	Copy personal property total	\$9,360.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$39,360.00

Fill in this infor	mation to identify your			
Debtor 1	Tamika Michelle	lones		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN	
Case number	17-44665-TJT			
(if known)	17 44000 101			☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	It 1: Identify the Property You Claim as E	xempt							
1.	Which set of exemptions are you claiming?	? Check one only, eve	n if yo	ur spouse is filing with you.					
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	18997 Kenosha St. Harper Woods, MI 48225 Wayne County	\$30,000.00		\$12,699.00	11 U.S.C. § 522(d)(1)				
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	Miscellaneous Household Goods and Furnishings	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	Miscellaneous Household Electronics	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					
	Miscellaneous Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Line Iron Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit					
	Miscellaneous Costume Jewelry	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)				
	Line from Schedule A/B: 12.1			100% of fair market value, up to					

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Checking Account: Christian Financial C.U.	\$250.00		\$250.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Share Account: Christian Financial C.U.	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every and the No Yes. Did you acquire the property covered No	3 years after that for ca	ses fi	,	,
	☐ Yes				

						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Filli	in this information to identify	your case:				
Deb	tor 1 Tamika Mich	elle Jones				
	First Name	Middle Name	Last Name			
	tor 2 use if, filing) First Name	Middle Name	Last Name			
(Spou	use if, filing) First Name	Middle Name	Last Name			
Unit	ed States Bankruptcy Court for	the: EASTERN DISTRICT OF MICH	IIGAN			
Cas	e number 17-44665-TJT					
(if kno	11 11000 101				☐ Check	if this is an
					amend	led filing
Οπ.	:-:-!					
	icial Form 106D		_			
Sc	hedule D: Credito	rs Who Have Claims S	Secured	by Propert	у	12/15
is nee		ole. If two married people are filing togethe Il it out, number the entries, and attach it t				
	any creditors have claims secure	d by your property?				
	_ •	nit this form to the court with your other	schedules. Yo	ou have nothing else t	o report on this form.	
	Yes. Fill in all of the information	•		, a g g		
Part				Column A	Column B	Column C
		has more than one secured claim, list the cred has a particular claim, list the other creditors		Amount of claim	Value of collateral	Unsecured
		betical order according to the creditor's name		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	Union	Describe the property that secures the	he claim:	\$5,000.00	\$5,000.00	\$0.00
	Creditor's Name	2009 Saturn Vue	•	_		
	40444 UK D I	As of the date you file, the claim is: 0	Check all that			
	18441 Utica Road Roseville, MI 48066	apply.				
	Number, Street, City, State & Zip Code	Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.				
■ D	Debtor 1 only	☐ An agreement you made (such as n	nortgage or sec	ured		
	Debtor 2 only	car loan)				
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	hanic's lien)			
	at least one of the debtors and anoth	•				
	Check if this claim relates to a	Other (including a right to offset)	PMSI			
(community debt					
Date	debt was incurred 08/2014	Last 4 digits of account numb	er 2001			
	-					
2.2	Wayne County Treasurer			\$17,301.00	\$30,000.00	\$0.00
	Creditor's Name	18997 Kenosha St. Harper W MI 48225 Wayne County	oods,			
	400 Monroe - 5th Floor	As of the date you file, the claim is: (apply.	Check all that			
	Detroit, MI 48226-2942	Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
		Disputed				
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.				
	Debtor 1 only	An agreement you made (such as n car loan)	nortgage or sec	ured		
	Debtor 2 only	<u>_</u>				
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, med	hanic's lien)			
ЦA	at least one of the debtors and anoth	er				

Official Form 106D

☐ Check if this claim relates to a

community debt

Schedule D: Creditors Who Have Claims Secured by Property

Other (including a right to offset)

page 1 of 2

Property Tax Lien

Deptor 1	i amika ivi	cnelle Jones		Case number	(if know)	17-44665-IJI
ī	First Name	Middle Name	Last Name			
		2011 - 2012 - 2013 -				
		2014 - 2015				
Date debt w	as incurred	- 2016	Last 4 digits of account number			
Add the d	ollar value o	f your entries in Columi	n A on this page. Write that number h	ere:	\$22,301.0	00
	he last page number her	•	ollar value totals from all pages.		\$22,301.0	00
Part 2: L	ist Others t	o Be Notified for a D	ebt That You Already Listed			
trying to co	llect from yo editor for an	u for a debt you owe to	fied about your bankruptcy for a debt someone else, list the creditor in Par listed in Part 1, list the additional cred ge.	t 1, and then list the co	llection agend	cy here. Similarly, if you have more
		reet, City, State & Zip Co	ode	On which line in Part 1	did you enter	the creditor? 2.2
903		e Rd., Suite C		Last 4 digits of accoun	t number	

					4/13/17 4:34PM
Fill in this inf	ormation to identify your	case:			
Debtor 1	Tamika Michelle	Jones			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Opodse II, IIIIIg)	i iist ivailie				
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Case number	17-44665-TJT				
(if known)					☐ Check if this is an
					amended filing
Official Fo	orm 106E/F				
	E/F: Creditors W	ho Have Unsecu	red Claims		12/15
Schedule G: Ex Schedule D: Cre left. Attach the (name and case	ecutory Contracts and Unexpeditors Who Have Claims Sec Continuation Page to this pag number (if known).	ired Leases (Official Form 10 ured by Property. If more spa le. If you have no information	6G). Do not include ice is needed, copy	any creditors with partially sec the Part you need, fill it out, nu	perty (Official Form 106A/B) and on ured claims that are listed in mber the entries in the boxes on the of any additional pages, write your
	t All of Your PRIORITY Un				
	ditors have priority unsecure	a ciaims against you?			
■ No. Go	to Part 2.				
Part 2: Lis	t All of Your NONPRIORIT	V Uneccured Claims			
☐ No. You ☐ Yes. 4. List all of y unsecured than one cn	claim, list the creditor separately	art. Submit this form to the cou aims in the alphabetical orde y for each claim. For each claim	r of the creditor who	holds each claim. If a creditor hype of claim it is. Do not list claim	nas more than one nonpriority is already included in Part 1. If more ns fill out the Continuation Page of
Part 2.					Total claim
4.1 Ame	ricollect Inc	Last 4 digits	of account number	0003	\$34.00
Nonpri Po B 1851	ority Creditor's Name ox 1566 S Alverno Rd towoc, WI 54221		e debt incurred?	Opened 10/13	
Numbe	er Street City State Zlp Code ncurred the debt? Check one.	As of the date	you file, the claim	is: Check all that apply	
Del	btor 1 only	☐ Contingent	t		
☐ Del	btor 2 only	☐ Unliquidate	ed		
☐ Del	btor 1 and Debtor 2 only	☐ Disputed			
☐ At I	east one of the debtors and and	Juliei	PRIORITY unsecure	d claim:	
	eck if this claim is for a com				
debt Is the	claim subject to offset?	report as prior	ity claims	ration agreement or divorce that	you did not
■ No		☐ Debts to pe	ension or profit-sharir	g plans, and other similar debts	
☐ Yes	S	Other. Spe	Collection Surgical A	Attorney Ear Nose Throass	at

Debtor	1 Tamika Michelle Jones		Case number (if know) 17-44	1665-TJT
4.2	Capital One	Last 4 digits of account number	8703	\$0.00
	Nonpriority Creditor's Name Attn: General Correspondence/Bankruptcy Po Box 30285	When was the debt incurred?	Opened 7/09/14 Last Acti 4/01/15	ve
	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you o	lid not
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		
4.3	Credit Management, LP Nonpriority Creditor's Name	Last 4 digits of account number	1021	\$225.00
	The Offices of Credit Management,	When was the debt incurred?	Opened 11/13	
	Po Box 118288 Carrolton, TX 75011 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only			
	Debtor 2 only			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	\square Check if this claim is for a community debt		ration agreement or divorce that you o	lid not
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	Yes	Collection A Service -	e 	
4.4	Dept Of Ed/582/neInet Nonpriority Creditor's Name	Last 4 digits of account number	3232	\$3,841.00
	Attn: Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 05/13 Last Active 2/28/17	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated ☐ Disputed		
	Debtor 1 and Debtor 2 only	l claim:		
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	· viuilli	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you o	lid not
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
	55	Educations	1	

Attn: Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Per Substance No Deptor 5 Name Opened 10/13 Last Active 2/28/17 As of the date you file, the claim is: Check all that apply Contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Debtor 4 only Disputed Type of NONPRIORITY unsecured claim: Debtor 4 only Disputed Type of NONPRIORITY unsecured claim: Debtor 5 onl	
Attn: Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Poebtor 1 onfset? Opened 10/13 Last Active 2/28/17 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Educational	\$3,399.00
Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Contingent Contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Cobligations arising out of a separation agreement or divorce that you did not report as priority claims Coherc. Specify Contingent Con	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Educational	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Educational	
Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt	
debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Educational	
■ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify ■ Educational	
Educational	
4.6 Dept Of Ed/582/neInet Last 4 digits of account number 3332 Nonpriority Creditor's Name	\$2,445.00
Attn: Claims/Bankruptcy Po Box 82505 When was the debt incurred? Lincoln, NE 68501 Opened 05/13 Last Active 2/28/17	
Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.	
■ Debtor 1 only □ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? report as priority claims	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify Educational	
	£4.044.00
4.7 Dept Of Ed/582/neInet Nonpriority Creditor's Name Attn: Claims/Bankruptcy Po Box 82505 Last 4 digits of account number Opened 01/14 Last Active 2/28/17	\$1,944.00
Lincoln, NE 68501 Number Street City State Zlp Code Who incurred the debt? Check one. As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only □ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify	
Educational	

■ No ☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

report as priority claims

Other. Specify

Is the claim subject to offset?

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Educational

Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify **Educational**

Official Form 106 E/F

debt

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Student loans

☐ Other. Specify

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Educational

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 9

Debtor 1 Ta	mika M	lichelle Jones	Case r	number (if know)	17-44665-TJ
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total	Claim
Total	6f.	Student loans	6f.	\$	61,064.00
claims					
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	477.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	61,541.00

Fill in this inform	nation to identify your	case:		
Debtor 1	Tamika Michelle	Jones		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN	
_	17-44665-TJT			
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3	-				
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	,		Jidio	1000	
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	

					4/13/17 4:34PM
Fill in this i	nformation to identify your	case:			
Debtor 1	Tamika Michelle	Jones			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	i) First Name	Middle Name	Last Name		
		EASTERN DISTRICT O			
United State	es Bankruptcy Court for the:	LASTERN DISTRICT O	FINICITIGAN		
Case numb	er 17-44665-TJT				Charlett this is an
(ii Kilowii)					Check if this is an amended filing
Official	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
1. Do y No Yes 2. With Arizona No. (Yes. 3. In Coluin line : Form 1	in the last 8 years, have you, California, Idaho, Louisiana Go to line 3. Did your spouse, former spo	you are filing a joint case, of a lived in a community property, Nevada, New Mexico, Publisher, or legal equivalent lived tors. Do not include your if that person is a guarant	do not list either spouse operty state or territor erto Rico, Texas, Wash with you at the time? spouse as a codebtor tor or cosigner. Make	ry? (Community property statington, and Wisconsin.) r if your spouse is filing with sure you have listed the cre	
	Column 1: Your codebtor	WD 0. 1			to whom you owe the debt
Na	ame, Number, Street, City, State and Z	ir Gode		Check all schedules that	it apply:
3.1				Schedule D, line _	
IN	ame			☐ Schedule E/F, line ☐ Schedule G, line _	
_	Otro et			— Scriedule G, line _	
	umber Street ity	State	ZIP Code		
-					
3.2				Schedule D, line _	
N	ame			☐ Schedule E/F, line	
				☐ Schedule G, line	
	umber Street ity	State	ZIP Code		
· ·	•		5545		

Debtor 1	Tamika Michelle Jones	
Debtor 2 (Spouse, if filing)		
United States Ban	skruptcy Court for the: EASTERN DISTRICT OF MICHIGAN	
Case number	17-44665-TJT	Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	<u>rm 106l</u>	MM / DD/ YYYY
Schedule	I: Your Income	12/1:
supplying correct spouse. If you are	nd accurate as possible. If two married people are filing together (Del tinformation. If you are married and not filing jointly, and your spous te separated and your spouse is not filing with you, do not include info sheet to this form. On the top of any additional pages, write your name	e is living with you, include information about your ormation about your spouse. If more space is needed,

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. □ Employed ■ Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Parking Meter Reader** Include part-time, seasonal, or **Employer's name City of Detroit** self-employed work. **Employer's address Finance Department** Occupation may include student or homemaker, if it applies. Coleman A. Young Municipal Bldg.Suite 120 Detroit, MI 48226 How long employed there? 4 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

		Tor Deptor 1	non-filir	ng spouse
2.	\$	1,941.33	\$	N/A
3.	+\$	0.00	+\$	N/A
4.	\$	1,941.33	\$	N/A_

For Debtor 1 For Debtor 2 or

Debt	or 1	Tamika Michelle Jones	_		Case	number (<i>if k</i>	nown)	17-44	4665-T	JT		
			_									
					For	Debtor 1		For	Debtor	2 or		
								non-	-filing s	pou	se	
	Cop	y line 4 here	4.		\$_	1,94	1.33	\$		l	N/A	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	۱.	\$	57	9.48	\$		1	N/A	
	5b.	Mandatory contributions for retirement plans	5b).	\$_		0.00	\$			V/A	
	5c.	Voluntary contributions for retirement plans	5c	; .	\$		0.00	\$		I	V/A	
	5d.	Required repayments of retirement fund loans	5d	l.	\$		0.00	\$		I	N/A	
	5e.	Insurance	5e) .	\$	5	4.02	\$			N/A	
	5f.	Domestic support obligations	5f.		\$		0.00	\$			N/A	
	5g.	Union dues	5g		\$_		0.00	\$			N/A	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$_			+ \$			N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_		3.50	\$			N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ _	1,30	7.83	\$			N/A	
8.		all other income regularly received:										
	8a.	Net income from rental property and from operating a business, profession, or farm										
		Attach a statement for each property and business showing gross										
		receipts, ordinary and necessary business expenses, and the total	_		•			•				
	O.L.	monthly net income.	8a		\$_		0.00	\$			V/A	
	8b.	Interest and dividends	8b).	\$		0.00	\$			N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive										
		Include alimony, spousal support, child support, maintenance, divorce										
		settlement, and property settlement.	80		\$		0.00	\$			N/A	
	8d.	Unemployment compensation	8d		\$		0.00	\$			N/A	
	8e.	Social Security	8e) .	\$		0.00	\$			N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance										
		that you receive, such as food stamps (benefits under the Supplemental	•									
		Nutrition Assistance Program) or housing subsidies.										
	_	Specify:	_ 8f.		\$_		0.00	\$			N/A	
	8g.	Pension or retirement income	8g		\$_		0.00				V/A	
	8h.	Other monthly income. Specify: Assistance From Mother	_ 8n	۱.+	\$_	50	0.00	+ \$			N/A	-
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	50	0.00	\$			N/A	
			г									1
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,807.83	+ \$		N/A	= \$	6	1,807.83
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.										
11.	Stat	e all other regular contributions to the expenses that you list in Schedule	J.									
		ude contributions from an unmarried partner, members of your household, your	depe	enc	lents,	your roon	nmates	s, and				
		er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	avail	ahl	a ta n	av evnens	eac lict	ed in S	chadul	. <i>I</i>		
	Spe	,	avan	abi	c to p	ay expend	003 1131	.cu iii o	11.			0.00
	·	•							1			
12.		I the amount in the last column of line 10 to the amount in line 11. The res										
		e that amount on the Summary of Schedules and Statistical Summary of Certai	in Lia	bili	ities a	nd Relate	d <i>Data</i>	a, if it	12.	\$		1,807.83
	app	iles								Ψ.		
											mbine	
13	Do v	you expect an increase or decrease within the year after you file this form	?							mo	ntniy	income
		No.	•									
		Yes. Explain:										
		• -										

Fill	I in this information to identify your case:				
Deb	totor 1 Tamika Michelle Jones			if this is:	
	btor 2		_ A	supplement show	ring postpetition chapter the following date:
Unit	ited States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAI	N	M	M / DD / YYYY	
1	se number 17-44665-TJT known)				
0	official Form 106J				
	chedule J: Your Expenses				12/15
info	e as complete and accurate as possible. If two married people are formation. If more space is needed, attach another sheet to this formber (if known). Answer every question.				
	rt 1: Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for	r Separate House	hold of Debtor	r 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the dependents names.				□ No □ Yes
					□ No
					Yes
					□ No □ Yes
					□ Yes
					□ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Par	rt 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date unless you penses as of a date after the bankruptcy is filed. If this is a supple plicable date.				
	clude expenses paid for with non-cash government assistance if y evalue of such assistance and have included it on Schedule I: You				
(Of	fficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. Including payments and any rent for the ground or lot.	ude first mortgage	4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		250.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home 	e equity loans	4d. \$ 5. \$		0.00
	5 5 , 1, 1 1 1 , 1 1 1 1 1 1 1 1 1 1 1 1	. ,			

Debtor 1	Tamika Michelle Jones	Case numi	per (if known)	17-44665-TJT
i. Utiliti	ine			
6a.	Electricity, heat, natural gas	6a.	\$	200.00
6b.	Water, sewer, garbage collection	6b.	\$	80.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	*	140.00
6d.	Other. Specify:	6d.	•	0.00
	I and housekeeping supplies	— 7.	\$	200.00
	dcare and children's education costs	7. 8.	\$	
-		o. 9.	\$	0.00
	ning, laundry, and dry cleaning		·	50.00
	onal care products and services	10.	\$	0.00
	cal and dental expenses	11.	\$	50.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	100.00
	ot include car payments.	13.	\$	
	rtainment, clubs, recreation, newspapers, magazines, and books		·	0.00
	itable contributions and religious donations	14.	Ф	0.00
5. Insur				
	ot include insurance deducted from your pay or included in lines 4 or 20.	150	c	0.00
	Life insurance	15a.	•	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.		216.48
	Other insurance. Specify:	15d.	\$	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Speci		16.	\$	0.00
	Illment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as		· 	
	icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	r payments you make to support others who do not live with you.		\$	0.00
Speci		19.		
	r real property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	ur Income.	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	\$	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20d. 20e.	·	
			·	0.00
. Other	r: Specify:	21.	+\$	0.00
Calc	ulate your monthly expenses			
	Add lines 4 through 21.		\$	1,286.48
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	1,200.70
			· <u> </u>	4 000 40
22c. /	Add line 22a and 22b. The result is your monthly expenses.		\$	1,286.48
3. Calci	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,807.83
	Copy your monthly expenses from line 22c above.	23b.	·	1,286.48
۷۵۵.	Copy your monthly expenses non-line 220 above.	230.	-ψ	1,200.48
220	Subtract your monthly expenses from your monthly income			
∠3C.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	521.35
	The result is your monthly het income.	200.	*	
	ou expect an increase or decrease in your expenses within the year after yo	ou file this	form?	
4 Do w	ou oxpool an moreage of deoreage in your expenses within the year after yo	va 111 5 11113		
	xample, do you expect to finish paying for your car loan within the year or do you expect you	r mortgage r	avment to incre	ease or decrease because o
For ex	xample, do you expect to finish paying for your car loan within the year or do you expect you ication to the terms of your mortgage?	r mortgage p	ayment to incre	ease or decrease because c
For ex	ication to the terms of your mortgage?	r mortgage p	eayment to incre	ease or decrease because o

Fill in this info	ormation to identify your	case:		
Debtor 1	Tamika Michelle			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN	
Case number	17-44665-TJT			
(if known)				Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an	attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
that they are true and correct. X /s/ Tamika Michelle Jones	e summary and schedules filed with this declaration and
Tamika Michelle Jones Signature of Debtor 1	Signature of Debtor 2
Date April 13, 2017	Date

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill	in this inform	nation to identify you	r case:					
De	btor 1	Tamika Michelle	Jones					
		First Name	Middle Name	Last Name				
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name				
Un	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN				
0 -								
	se number <u>1</u>	7-44665-TJT			_	heck if this is an mended filing		
St Be	as complete a	of Financial	ble. If two married people a		ankruptcy equally responsible for sup additional pages, write you			
). Answer every ques etails About Your Ma	stion. Irital Status and Where You	Lived Before				
1.	<u> </u>	current marital statu						
	☐ Married■ Not married	ried						
2.	During the la	During the last 3 years, have you lived anywhere other than where you live now?						
	■ No	■ No						
	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there		
3. stat					ity property state or territory co, Texas, Washington and W			
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).				
Pa	rt 2 Explain	n the Sources of You	r Income					
4.	Fill in the tota	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?		
	□ No ■ Yes. Fill	in the details.						
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,676.00	☐ Wages, commissions, bonuses, tips			
			☐ Operating a business		☐ Operating a business			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commission bonuses, tips	ns,
	☐ Operating a business		☐ Operating a busines	ss
For the calendar year before that: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commission bonuses, tips	ns,
	☐ Operating a business		☐ Operating a busines	SS
winnings. If you are filing a joint case List each source and the gross inco No Yes. Fill in the details.	,	· ·	•	
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Part 3: List Certain Payments You	ı Made Before You Filed for E	Bankruptcv		
individual primarily for a During the 90 days beform No. Go to line 7 Yes List below a paid that or not include	Debtor 2 has primarily consular personal, family, or household ore you filed for bankruptcy, did	mer debts. Consumer debted purpose." If you pay any creditor a total of \$6,425* or more to for domestic support obliquis bankruptcy case.	Il of \$6,425* or more? in one or more payments gations, such as child sup	and the total amount you port and alimony. Also, do
	or both have primarily consulore you filed for bankruptcy, did		l of \$600 or more?	
■ No. Go to line 7	7.			
include pay	each creditor to whom you paid yments for domestic support ob r this bankruptcy case.			
Creditor's Name and Address	Dates of paymen	nt Total amount	Amount you Was	this payment for

Yes. Fill in the information below.

Creditor Name and Address Value of the **Describe the Property** Date property **Explain** what happened

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Nο

☐ Yes. Fill in the details.

Creditor Name and Address Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person

Describe the gifts

Dates you gave the gifts

Value

Person to Whom You Gave the Gift and Address:

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

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14.	Within 2 years before you filed for bank No			s with a tota	I value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	Describe what you contributed		Dates you contributed	Value
Pai	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankr or gambling?	uptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the log the amount that insurance has paid. Lince claims on line 33 of Schedule A/B: I	ist pending	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfe	rs				
16.	Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No	r preparir	ng a bankruptcy petition?		, , ,	rty to anyone you
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
	Acclaim Legal Services, PLLC 8900 E. 13 Mile Rd. Warren, MI 48093				March 27, 2017	\$310.00
	CIN Legal Data Services 4540 Honeywell Ct. Dayton, OH 45424		\$60.00 credit counseling, debto education, and credit reports	or	March 27, 2017	\$60.00
17.	Within 1 year before you filed for bankr promised to help you deal with your crubo not include any payment or transfer the	editors o	r to make payments to your creditors		r transfer any prope	rty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a second in the course of th	our businers made a	ess or financial affairs? as security (such as the granting of a se			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts	Date transfer was made
	Person's relationship to you			paid in ex		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which y beneficiary? (These are often called asset-protection devices.)			of which you are a			
■ No □ Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made
Par	rt 8: List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and S	torage Unit	s	
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, clos sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, broken houses, pension funds, cooperatives, associations, and other financial institutions.						
	No					
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco instrument	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, a	ny safe dep	oosit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit No	or place other than your	home within 1	l year befor	re you filed for bankrupt	cy?
	☐ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Par	rt 9: Identify Property You Hold or Control	l for Someone Else				
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any propei	rty you born	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)	•	Describe	the property	Value
Par	rt 10: Give Details About Environmental Inf	,				
For	the purpose of Part 10, the following definiti	ions apply:				
	Environmental law means any federal, state toxic substances, wastes, or material into t regulations controlling the cleanup of these	he air, land, soil, surfac	e water, ground	• .		
	Site means any location, facility, or propert	y as defined under any		law, wheth	er you now own, operate	e, or utilize it or used

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.

24.	I. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	■ No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of ar	ny release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admir	nistrative proceeding under any envi	ronmental law? Include settlements a	and orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	11: Give Details About Your Business or Co	onnections to Any Business				
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have an	y of the following connections to any	business?		
	☐ A sole proprietor or self-employed in a	a trade, profession, or other activity,	either full-time or part-time			
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	☐ A partner in a partnership					
	☐ An officer, director, or managing exec	utive of a corporation				
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation				
	■ No. None of the above applies. Go to Par	rt 12.				
	☐ Yes. Check all that apply above and fill in	the details below for each business	<u>.</u>			
		Describe the nature of the business	Employer Identification number			
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	number or IIIN.		
28.	28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.					
	■ No					
	Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Tamika Michelle Jones

Tamika Michelle Jones
Signature of Debtor 2

Signature of Debtor 1

Date April 13, 2017
Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No
Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

United States Bankruptcy Court Eastern District of Michigan

In re	Tamika Michelle Jones			17-44665-TJT	
		Debtor(s)	Chapter	13	
	VE	RIFICATION OF CREDITOR M	ATRIX		
Γhe abo	ove-named Debtor hereby verific	es that the attached list of creditors is true and corr	ect to the best	of his/her knowledge.	
Date:	April 13, 2017	/s/ Tamika Michelle Jones Tamika Michelle Jones			

Signature of Debtor